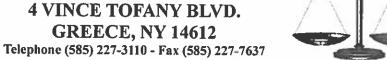


## TOWN OF GREECE JUSTICE COURT 4 VINCE TOFANY BLVD. GREECE, NY 14612





Town Justice
David M. Barry Sr., Administrative Judge
Brett C. Granville
Vincent B. Campbell
Shannon O'Keefe Pero

William D. Reilich Town Supervisor

## **PLEA**

NAME			A 18	DATE OF BIRTH
ADDRESS	<del>- 1</del>			
CITY/STATE/ZIP				
I,				AM PLEADING
	(CHOOSE ONE)	GUILTY	NOT GUILTY	-
		TICKET NUM	IBER(S)	
SIGNATURE				DATE
I request a Supporting	Deposition (this can only	be requested within	n 30 days of receiving a ticket)	YES NO
The DMV will revoke y	UT INSURANCE VTL 31 your license for at least on a license or registration ca	e year if you plead s	guilty. (additional civil penalty of utomatically revokes driver lice	「\$750 assessed by DMV nse and/or registration for at
I have read the above p	enalties and do still wish	to plead guilty (initi	als)	